

**DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES  
QUALITY ASSURANCE DIVISION  
CHILD CARE LICENSING**

**CHILD CARE FACILITY  
FIRE SAFETY RECORD AND EVACUATION PLAN**

*Please Post*

**Check Daily:**

- Evacuation plan and procedures are posted
- Exits open freely; exits are not blocked
- Electrical appliances are working properly
- Electrical outlets are not overloaded
- Extension cords are not used in place of permanent wiring
- Fireplaces, wood burning stoves, fireplace inserts, heaters, etc., are used safely and barricaded when needed
- Combustible rubbish is not allowed to accumulate
- Flammable or combustible material is stored safely

**MONTHLY FIRE DRILL RECORD**

Month:	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Date:												
Time:												
Number of Children:												
Number of Adults												
Length of Drill:												
Initials of Tester												

**SMOKE DETECTOR**

Date Detector Checked (Monthly)												
Date Batteries Replaced (Annually)												
Initials of Tester												

**FIRE EXTINGUISHER RECORD**

Date Extinguishers Serviced (Annually)												
Initials of Tester												

*Please write your plan to evacuate children from your facility in case of fire. Use the back of this sheet or attach another sheet answering the following questions!*

- 1. What will the person discovering the fire do?*
- 2. How will you sound the alarm?*
- 3. What will you do before the fire department arrives?*
- 4. How will you make sure all persons are evacuated and accounted for?*

*Providers Name / Address:*

*Date:*